MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.	IND.	DEP.	IND.	DEP.
1														
2								51						
3								52						
4								53						
5								54						
6								55						
7								56						
8								57						
9								58						
10								59						
11				1				60						
12				1				61						
13				1				62						
14				1				63						
15				1				64						
16				1				65						
17				1				66						
18								67						
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44								93						
45								94						
46								95						
47								96						
48								97						
49								98						
50								99						
TOTAL IND.		↓	1	↓		↓		100						
TOTAL DEP.		←	0	←		←		TOTAL IND.		↓		↓		↓
TOTAL CLAIMS			8					TOTAL DEP.		←		←		←
								TOTAL CLAIMS						